Schedule E)	FOR SE OF FORM 24/48	
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Women Vote!		
	C C00473918	
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dab / Yayayay	
Full Name of Payee	Date of Public Distribution/Dissemination	
AL Media LLC	08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 222 W Ontario St		
Ste 600	Amount	
City State Zip Code	5000.00	
Chicago IL 60654-3655	Transaction ID: VN7A7A2BSS7 Date of Disbursement or Obligation	
Purpose of Expenditure Media Production Category/ Type 004	M - M / D - D / Y - Y - Y	
Name of Federal Candidate Support Office	Sought: X House District: 09	
Susannah Randolph Oppose	President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
AL Media LLC	08 17 2016	
Mailing Address 222 W Ontario St		
Ste 600	Amount	
City State Zip Code	2500.00	
Chicago IL 60654-3655	Transaction ID : VN7A7A2BST5 Date of Disbursement or Obligation	
Purpose of Expenditure Media Production Category/ Type 004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	e Sought: X House District: 09	
Dena Grayson MD, PHD Oppose	President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	7500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Caroline Fines [Electronically Filed] Date 0	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature [Electronically Filed] Date 0	8 17 2016	

Schedule E)	PAGE 2 OF 5 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Women Vote!	C C00473918	
Check if 24-hour report 48-hour report Mew report Amends report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination	
AL Media LLC	08 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 222 W Ontario St	Amount	
Ste 600	7.04	
City State Chicago IL	Zip Code 2500.00 60654-3655	
	Date of Disbursement or Obligation	
Purpose of Expenditure Media Production	Category/ Type 004	
Name of Federal Candidate	Support Office Sought: House District: 09	
Darren Soto	Oppose President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
AL Media LLC	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 222 W Ontario St	Amount	
Ste 600		
City State	Zip Code 20000.00	
Chicago IL	60654-3655 Transaction ID : VN7A7A2BSW1 Date of Disbursement or Obligation	
Purpose of Expenditure Media Buy Digital	Category/ Type 004	
Name of Federal Candidate	Support Office Sought: House District: 09	
Susannah Randolph	Oppose President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶	
-		
(a) SUBTOTAL of Itemized Independent Expenditures	22500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	ectronically Filed] Date 08 17 2016	
Signature		

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Women Vote!	C C00473918	
Check if X 24-hour report 48-hour report New report Amends report	rt filed on	
Full Name of Payee AL Media LLC	Date of Public Distribution/Dissemination	
Mailing Address 222 W Ontario St	08 17 2016	
Ste 600	Amount	
City State Zip Code	10000.00	
Chicago IL 60654-3655	Transaction ID : VN7A7A2BSY7 Date of Disbursement or Obligation	
Purpose of Expenditure Media Buy Digital Category/ Type 004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support	Office Sought: X House District: 09	
Dena Grayson MD, PHD Oppose	President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought 101808.14	Disbursement For:	
Full Name of Payee AL Media LLC	Date of Public Distribution/Dissemination	
AL Media LLC	08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 222 W Ontario St	Amount	
Ste 600		
City State Zip Code	10000.00 Transaction ID : VN7A7A2BSZ5	
Chicago IL 60654-3655	Date of Disbursement or Obligation	
Purpose of Expenditure Media Buy Digital Category/ Type 004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support	Office Sought:	
Darren Soto Oppose	President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	. ▶ 20000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	•	
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Caroline Fines [Electronically Filed] Date	08 17 2016	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Women Vote!	C C00473918	
Check if 24-hour report 48-hour report New report Amends report	iled on	
Full Name of Payee Mission Control, Inc.	Date of Public Distribution/Dissemination	
· ·	08 17 2016	
Mailing Address 624 Hebron Ave	Amount	
City State Zip Code	6554.45	
Glastonbury CT 06033-2470	Transaction ID : VN7A7A2BSN6 Date of Disbursement or Obligation	
Purpose of Expenditure Mailhouse Category/ Type 004	M M / D D / Y Y Y Y	
Name of Federal Candidate Support C	rffice Sought: X House District:09	
Susannah Randolph Oppose	President Senate State: FL	
	isbursement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
Mission Control, Inc.	08 17 2016	
Mailing Address 624 Hebron Ave	Amount	
City State Zip Code	3277.22	
Glastonbury CT 06033-2470	Transaction ID: VN7A7A2BSQ2 Date of Disbursement or Obligation	
Purpose of Expenditure Mailhouse Category/ Type 004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support C	Office Sought: X House District: 09	
Dena Grayson MD, PHD Oppose	President Senate State: FL	
	oisbursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	9831.67	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Caroline Fines [Electronically Filed] Date	08 17 2016	
Signature		

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Women Vote!	C C00473918	
Check if X 24-hour report 48-hour report X New report X Amends	report filed on MMM / DDD / YTYTY	
Full Name of Payee Mission Control, Inc.	Date of Public Distribution/Dissemination	
	08 17 2016	
Mailing Address 624 Hebron Ave	Amount	
City State Zip Code	3277.23	
Glastonbury CT 06033-2470	Transaction ID: VN7A7A2BSR0 Date of Disbursement or Obligation	
Purpose of Expenditure Mailhouse Category/ Type	004	
Name of Federal Candidate Suppo	ort Office Sought: X House District: 09	
Darren Soto Oppos	See President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought 101808.14	Disbursement For:	
Full Name of Payee Moxie Media	Date of Public Distribution/Dissemination	
Woxie Wedia	08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 30084	Amount	
City State Zip Code	16914.74	
Seattle WA 98113-2084	Transaction ID: VN7A7A2BSM8 Date of Disbursement or Obligation	
Purpose of Expenditure Mailhouse Category/ Type	004 M M / D D / Y Y Y Y	
Name of Federal Candidate Suppo	ort Office Sought: X House District: 26	
Annette Taddeo Oppos	se President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought 34602.71	Disbursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	20191.97	
(a) 33213 M2 of homizon maspendink Expenditures	20191.97	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	80023.64	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	Date 08 17 2016	
Signature		